

Quick Reference Guide

Pre- Authorization

Call: 1-844-857-1601

Fax: 1-800-413-8347

Email: auths@dignityhmo.com

For eligibility and claims please
call Customer Service at
1-866-266-6010

Monday through Friday
8 a.m.-8 p.m. CST.

Authorization form is online at
www.DignityHealthPlan.com

Demographic Changes to
Provider@dignityhmo.com

Pre- Authorization

Notification of planned admissions should be submitted 10 days prior to the planned admission date. Unplanned admissions should be reported to Dignity within 24 hours. Weekend and holiday admissions should be reported by 5p.m. the next day.

Pre-authorization is required for the following services:

- Inpatient Admissions
- Rehabilitation Services; Specialized Structured Programs, Inpatient and Outpatient
- Planned Outpatient/Observation Admissions
- Inpatient Behavioral Health/ Chemical Dependency
- Outpatient Surgery Procedures (including those performed at a hospital or ASC)
- Transplant services
- Durable Medical Equipment (over \$500)
- High Tech Diagnostic/Therapeutic Radiological Services
- Dialysis
- Part B drugs (over \$500)



Claims Submission

Dignity Payer EDI# 83247

Paper Claims

Dignity Health Plan

Access Health Services

PO Box 3398

Little Rock, AR 72202-3398

Pharmacy Benefit Inquiry and Authorization:

Elixir 1-833-661-6010

Pharmacist 1-833-661-1989

RX BIN# 012312

For prescription drug benefit questions or coverage determinations (drug authorizations) please call Elixir, Dignity's pharmacy benefit manager. Assistance is available 7 days a week, 24 hours a day.

Claims will be processed in accordance with original Medicare billing rules, Medicare fee schedules, prospective payment system requirements, local Coverage Determinations (LDCs) and the Dignity Terms and Conditions of Payment. All payment methodologies are updated in accordance with CMS final rules and correction notices published in the Federal Register and CMS transmittals. Dignity uses Correct Coding Initiative (CCI) for bundling/unbundling logic. Provider fees are updated quarterly as files become available on the CMS website.

Please refer to your provider agreement for claims timely filing information.

As an Institutional Special Needs Plan, some members may be eligible for the cost sharing benefits provided by Louisiana Medicaid. Providers are not allowed to charge co-payments, co-insurance or deductible charges that are the responsibility of Dignity or Louisiana Medicaid.

ALWAYS REFER DIGNITY MEMBERS TO DIGNITY CONTRACTED PROVIDERS, WHEN POSSIBLE. PLEASE VISIT OUR WEBSITE TO DETERMINE WHICH PROVIDERS ARE CONTRACTED.

Additional online tools and resources, including the provider manual, billing tips and reimbursement methodologies are available at: <http://dignityhealthplan.com>

Dignity Health Plan is a Medicare Advantage Plan designed specifically for residents of nursing homes with Medicare Part A and Part B.

Medicare number (H8492)

Dignity Care Corporation

950 West Causeway Approach

Mandeville, LA 70471

PHONE: 1-866-266-6010 TTY: 711

8am to 8pm, seven days a week

info@dignityhmo.com

www.DignityHealthPlan.com

